

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 302039

**FILED**  
**Jan 12, 2017**  
**Secretary of State**  
**CC7204663997**

**Entity Name:** LERMAN & LERMAN, P.A.

**Current Principal Place of Business:**

48 EAST FLAGLER STREET  
PH 101  
MIAMI, FL 33131

**Current Mailing Address:**

48 EAST FLAGLER STREET  
PH 101  
MIAMI, FL 33131

**FEI Number:** 59-1114777

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LERMAN, JORGE  
48 EAST FLAGLER STREET, PH 101  
MIAMI, FL 33131 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	PSD
Name	LERMAN, JORGE
Address	1730 NE 197TH TERRACE
City-State-Zip:	MIAMI FL 33179
Title	TREASURER
Name	LERMAN, MATTHEW
Address	48 EAST FLAGLER STREET PH 101
City-State-Zip:	MIAMI FL 33131

Title	VP
Name	LERMAN, BENJAMIN W
Address	48 EAST FLAGLER STREET PH 101
City-State-Zip:	MIAMI FL 33131

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JORGE LERMAN

**PRESIDENT**

**01/12/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date